PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2000 CLAIMS AS FILED - PART I

Application or Docket Numb	
1996-889	83

CLAIMS AS FILED - PART I (Column 1)			38		SMALL ENTITY TYPE		OR	OTHER THAN					
TOTAL CLAIMS								RATE	FEE		RATE	FEE	
FOR NUMBER FILED			.ED	NUMBER EXTRA			BASIC FEE	355.00	OR	BASIC FEE	710.00		
TOTAL CHARGEABLE CLAIMS 5 minus 20=					*			X\$ 9=		OR	X\$18=		
INDEPENDENT CLAIMS 3 =					•			X40=		OR	X80=		
MULTIPLE DEPENDENT CLAIM PRESENT								+135=		OR	+270=		
* If the difference in column 1 is less than zero, enter					"0" in c	olumn 2		TOTAL	345	OR	TOTAL		
CLAIMS AS AMENDED - PART II (Column 1) (Column 2)						(Column 3)	<u> </u>	SMALL E	NTITY	OR	OTHER SMALL		
AMENDMENT A	7	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDE	Total	· 351	Minus	H	4	= 0		X\$ 9=		OR	X\$18=		
AME	Independent	NTATION OF M	Minus	MOENT	CLAINA	= ()		X40=		OR	X80≠		
<u></u>	FINOT FRESE	NIAHON OF MI	DETIFIE DEFE	INDEN	CLAIN			+135=		OR	¥270=		
								/TOTAL ADDIT, FEE		OR	TOTAL ADDIT. FEE		
	(Column 1) (Column 2) (Column 3)												
ENT B	al a	CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
AMENDMENT	Total	•	Minus	••		=		X\$ 9=	•	OR	X\$18=		
AME	Independent	NTATION OF M	Minus OFFI	AIDENT	CLAIN	-	┨│	X40=		OR	X80=		
<u> </u>	FIRST PRESE	NIATION OF MI	JLIIPLE DEPE	INDEN	CLAIM		ال	+135=		OR	+270=		
TOTAL ADDIT. FEE										OR	TOTAL ADDIT, FEE		
	en Sammer Speecher (1987)	(Column 1)		(Colur		(Column 3							
AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUM PREVIO PAID	BER OUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
NDW	Total	•	Minus	4+		=		X\$ 9=		OR	X\$18=		
AME	Independent	•	Minus	***		=	4	X40=		OR	X80=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						J	+135=			+270=		
If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR OR	TOTAL			
***	"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." **If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." **The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												